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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF NORTH CAROLINA	=	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
		e the name that is on	Edward	
		government-issued ire identification (for	First name	First name
		nple, your driver's use or passport).	Michael	
			Middle name	Middle name
		g your picture tification to your	Pinkosky	
	mee	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
	Inclu	ide your married or den names.		
	maic	ion namee.		
3.	you	the last 4 digits of Social Security ber or federal	xxx-xx-6786	
		vidual Taxpayer tification number N		

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Debtor 1 Edward Michael Pinkosky

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and	■ I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)
	doing business as names	EINs	EINs
5.	Where you live	29 Busters Drive	If Debtor 2 lives at a different address:
		Waynesville, NC 28786  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Haywood	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Edward Michael Pinkosky

Case number (if known)

Par	t 2: Tell the Court About	our Ba	ınkruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.		
	choosing to file under	Chapter 7						
		☐ Ch	apter 11					
		☐ Ch	apter 12					
		☐ Ch	apter 13					
8.	How you will pay the fee		about how yo	u may pay. Typi attorney is subn	ed (You may request this option only if you are filing for Chapter 7. By law, a judge may, ur fee, and may do so only if your income is less than 150% of the official poverty line that you are unable to pay the fee in installments). If you choose this option, you must fill out apter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.			
						on, sign and attach the Application for Individuals to Pay		
			J	Fee in Installments (Official Form 103A).  that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out				
			but is not requapplies to you	uired to, waive y ur family size an	our fee, and may do so only if your fee, and may do so only if you you are unable to pay the fee in	ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out		
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes	3.					
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business	☐ Yes	<b>3.</b>					
	partner, or by an affiliate?							
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	■ No.	Go to li	ine 12.				
	residence?	☐ Yes	s. Has yo	ur landlord obta	nined an eviction judgment agains	t you?		
				No. Go to line 1	12.			
					itial Statement About an Eviction	Judgment Against You (Form 101A) and file it as part of		

Document Page 4 of 60 Case number (if known) Debtor 1 Edward Michael Pinkosky Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. husiness? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or

livestock that must be fed, or a building that needs urgent repairs? Case 19-10017 Doc 1 Filed 01/17/19 Entered 01/17/19 14:05:23 Desc Main Document Page 5 of 60

Debtor 1 Edward Michael Pinkosky

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 60 Case number (if known) Debtor 1 **Edward Michael Pinkosky** Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000 50-99** owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 **200-999** 19. How much do vou **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you ■ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$100,001 - \$500,000 □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion ■ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Edward Michael Pinkosky Signature of Debtor 2 **Edward Michael Pinkosky** 

Executed on

MM / DD / YYYY

Signature of Debtor 1

January 17, 2019 MM / DD / YYYY

Executed on

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Debtor 1 Edward Michael Pinkosky Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ T. Bentley Leonard	Date	January 17, 2019
Signature of Attorney for Debtor	_	MM / DD / YYYY
T. Bentley Leonard 5717 Printed name		
Leonard & Moore PLLC		
Firm name		
274 Merrimon Avenue		
Asheville, NC 28801		
Number, Street, City, State & ZIP Code		
Contact phone 828-255-0456		bentley leon ard @leon ard and moore. c
Contact phone 828-255-0456	Email address	om
5717 NC		
Bar number & State		

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Fill in this infor	mation to identify your	case:		
Debtor 1	Edward Michael I	Pinkosky		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF NORTH CAROLINA	
Case number (if known)				☐ Check if this is an
				amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a Value o	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	359,500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,560.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	370,060.00
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	381,362.99
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	28,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	173,179.25
	Your total liabilities	\$	582,542.24
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,787.76
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,783.94
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a	a personal	family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Edward Michael Pinkosky

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	١.
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	\$

7,596.16

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	28,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	28,000.00

	Case 19-10	017 Doc 1		01/17/19 cument	Entered 01		14:05	:23 De:	sc M	lain
Fill in this i	nformation to ider	ntify your case and								
Debtor 1	Edward I	Michael Pinkosky	/ Idle Name		Last Name					
Debtor 2 (Spouse, if filing	) First Name	Mic	Idle Name		Last Name					
United State	s Bankruptcy Cour	t for the: WESTER	RN DISTR	ICT OF NOR	TH CAROLINA					
Case numbe	er				_					Check if this is an amended filing
Sched	st. Be as complete a more space is need	Property nd describe items. Lie and accurate as poss	ible. If two	married peopl	an asset fits in more the e are filing together, b e top of any additiona	ooth are eq	ually resp	onsible for su	the cat	correct
Part 1: Desc	cribe Each Residenc	e, Building, Land, or	Other Real	Estate You Ov	wn or Have an Interest	t In				
	o Part 2. nere is the property?									
1.1 20 Ru	ster Drive		What		y? Check all that apply					
29 Buster Drive  Street address, if available, or other description		_		nome Iti-unit building n or cooperative	1	the amount	luct secured claims or exemptions. t of any secured claims on <i>Schedu</i> Who Have Claims Secured by Prop		s on Schedule D:	
Wayn		C 28786-0000 ate ZIP Code	_ _ _	Land	operty		Current va entire prop \$35			ent value of the on you own? \$359,500.00
			□ Who		t in the property? Chec	ck one	(such as fo a life estat		ancy by	nership interest y the entireties, or
Hayw	ood					_				
County				At least one of	of the debtors and anoth		(see ins	c if this is com structions) cal	munity	property
			Hay bath		ty tax value on 1.	.44 acres	s (reside	ence, 2 - be	droor	ns, 2 1/2

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......>>

\$359,500.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Deb	etor 1 Edward N	lichael Pinkosky	Document Page 11 of 60 Car	se number (if known)	
3. <b>C</b>	ars, vans, trucks, tı	ractors, sport utility ve	hicles, motorcycles		
	No				
	Yes				
	loon			Do not deduct secure	d claims or exemptions. Put
3.1	14/	ılor	Who has an interest in the property? Check one	the amount of any sec	cured claims on Schedule D:
	Model: wrang	liei	■ Debtor 1 only □ Debtor 2 only		Claims Secured by Property.
	Approximate mileag	e: <b>150000</b>	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:		☐ At least one of the debtors and another		
	NADA clean re	tail value		\$7,600.0	97,600.00
			☐ Check if this is community property (see instructions)	Ψ1,000.00	<u> </u>
5 A .p	ages you have atta	ached for Part 2. Write the sersonal and Household Ite	n for all of your entries from Part 2, including any that number hereems ems terest in any of the following items?		\$7,600.00  Current value of the portion you own? Do not deduct secured
E	ousehold goods ar Examples: Major app I No I Yes. Describe	nd furnishings liances, furniture, linens,	, china, kitchenware		claims or exemptions.
		utensils \$30, po \$25, china cabir end tables \$20,	igerator \$150, microwave \$10, misc kitchen ts & pans \$35, hutch \$150, dining table w/c net \$75, sofa \$25, love seat \$15, coffee table 4 -throw rugs \$100, TV stand \$25, 1 - bedro hairs \$50, chase \$25, misc household tools chairs \$25.	hairs e \$25, 2 - om	\$1,060.00
		King size had \$	100 2 - night stands \$100		\$200.00
		King Size bed \$	100, 2 - night stands \$100		
		es and radios; audio, vide cell phones, cameras, m	eo, stereo, and digital equipment; computers, printer ledia players, games	s, scanners; music colle	ections; electronic devices
		5 - TVs \$100			\$100.00
E			prints, or other artwork; books, pictures, or other art llectibles	objects; stamp, coin, or	baseball card collections;

Official Form 106A/B Schedule A/B: Property page 2

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\$5.00 Cash

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

□ No

	Case 19-10017			Entered 01/1//19 14:05:23	Desc Main
Debtor 1	Edward Michael Pin	kosky	Document Pa	age 13 of 60  Case number (if known)	
■ Yes	S		Institution name	e:	
	17.1.	Checking	BB & T Bank	<b>S</b>	\$600.00
	ls, mutual funds, or public		okerage firms, money	market accounts	
■ No □ Yes	5	Institution or issuer	name:		
	publicly traded stock and venture	interests in incorpo	orated and unincorpo	orated businesses, including an interes	t in an LLC, partnership, and
	s. Give specific information Na	about themne of entity:		% of ownership:	
Nego Non- ■ No	negotiable instruments are	personal checks, cas those you cannot tra	shiers' checks, promiss	sory notes, and money orders.	
Exar ■ No	s. List each account separat	SA, Keogh, 401(k), 4	103(b), thrift savings ac	ecounts, or other pension or profit-sharing	plans
Your <i>Exar</i> ■ No	mples: Agreements with land	s you have made so	public utilities (electric	e service or use from a company , gas, water), telecommunications compar	nies, or others
	5		Institution name		
■ No	ities (A contract for a perio	e and description.	ey to you, either for life	or for a number of years)	
	sts in an education IRA, in S.C. §§ 530(b)(1), 529A(b),		ualified ABLE progra	nm, or under a qualified state tuition pro	ogram.
	s Institution r	name and description	n. Separately file the re	ecords of any interests.11 U.S.C. § 521(c)	:
■ No			ther than anything li	sted in line 1), and rights or powers exe	rcisable for your benefit
☐ Yes	s. Give specific information	about them			
Exar ■ No	nts, copyrights, trademark mples: Internet domain name s. Give specific information	es, websites, procee			
27. <b>Lice</b> n <i>Exar</i> ■ No	nses, franchises, and othe mples: Building permits, exc	r general intangible lusive licenses, coop		oldings, liquor licenses, professional licens	es
⊔ Yes	s. Give specific information	about them			

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

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Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

☐ Yes. Go to line 47.

Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7:

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53.	Do you have other property of any kind you did not already Examples: Season tickets, country club membership	list?			
	No				
	Yes. Give specific information				
54.	Add the dollar value of all of your entries from Part 7. Write	that	number here		\$0.00
Part	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$359,500.00
56.	Part 2: Total vehicles, line 5		\$7,600.00		
57.	Part 3: Total personal and household items, line 15	_	\$2,355.00		
58.	Part 4: Total financial assets, line 36	_	\$605.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+ _	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$10,560.00	Copy personal property total	\$10,560.0
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$370,060.00

Official Form 106A/B Schedule A/B: Property page 6

Page 16 of 60 Document Fill in this information to identify your case: Debtor 1 **Edward Michael Pinkosky** Middle Name Last Name First Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name United States Bankruptcy Court for the: WESTERN DISTRICT OF NORTH CAROLINA Case number (if known) ☐ Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the l	Property	You	Claim	as	Exemp	t
---------	----------	-------	----------	-----	-------	----	-------	---

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2002 Jeep Wrangler 150000 miles NADA clean retail value	\$7,600.00		\$3,500.00	N.C. Gen. Stat. § 1C-1601(a)(3)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	10-1001(a)(5)
2002 Jeep Wrangler 150000 miles NADA clean retail value	\$7,600.00		\$4,100.00	N.C. Gen. Stat. § 1C-1601(a)(2)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
stove \$100, refrigerator \$150, microwave \$10, misc kitchen utensils	\$1,060.00		\$1,060.00	N.C. Gen. Stat. § 1C-1601(a)(4)
\$30, pots & pans \$35, hutch \$150, dining table w/chairs \$25, china cabinet \$75, sofa \$25, love seat \$15, coffee table \$25, 2 - end tables \$20, 4 -throw rugs \$100, TV stand \$25, 1 - bedroom Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
King size bed \$100, 2 - night stands \$100	\$200.00		\$0.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line from Schedule A/B: <b>6.2</b>			100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
<b>5 - TVs \$100</b> Line from <i>Schedule A/B</i> : <b>7.1</b>	\$100.00	•	\$100.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line Irom Schedule A.B. 1.1			100% of fair market value, up to any applicable statutory limit	
AR 15 \$500, mossburg shot gun\$ 100, clock \$250	\$500.00		\$500.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
mossburg shot gun\$ 100, clock \$198	\$295.00		\$295.00	N.C. Gen. Stat. § 1C-1601(a)(2)
Line from Scneaule A/B: 10.2			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$200.00		\$200.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Line from Scriedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
Cash	\$5.00		\$5.00	N.C. Gen. Stat. § 1C-1601(a)(2)
Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit	
Checking: BB & T Bank	\$600.00		\$600.00	N.C. Gen. Stat. § 1C-1601(a)(2)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
<ul> <li>Are you claiming a homestead exemptio         (Subject to adjustment on 4/01/19 and ever         ■ No</li> <li>Yes. Did you acquire the property covered</li> </ul>	y 3 years after that for ca	ises fi		
□ No			,,,	

Yes

Case 19-10017 Doc 1 Filed 01/17/19 Entered 01/17/19 14:05:23 Desc Main Document Page 18 of 60 Fill in this information to identify your case: Debtor 1 **Edward Michael Pinkosky** Middle Name Last Name First Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name WESTERN DISTRICT OF NORTH CAROLINA United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column B Column C Column A 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this portion value of collateral. If anv **Havertys Furniture** \$1,892.00 \$200.00 \$1,692.00 Describe the property that secures the claim: Creditor's Name King size bed \$100, 2 - night stands \$100 As of the date you file, the claim is: Check all that PO Box 740506 apply Atlanta, GA 30374 ☐ Contingent Number, Street, City, State & Zip Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply ■ Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a ☐ Other (including a right to offset) community debt Date debt was incurred Last 4 digits of account number 2.2 Wells Fargo Bank Describe the property that secures the claim: \$379,470.99 \$359,500.00 \$19,970.99 Creditor's Name 29 Buster Drive Waynesville, NC 28786 Haywood County Haywood County tax value on 1.44 acres (residence, 2 - bedrooms, 2 Attn Bankruptcy Dept 1/2 bath) PO Box 10347 As of the date you file, the claim is: Check all that Des Moines, IA apply 50306-0347 ☐ Contingent Number, Street, City, State & Zip Code ■ Unliquidated

Who owes the debt? Check one.

■ Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

☐ Disputed

Nature of lien. Check all that apply.

☐ An agreement you made (such as mortgage or secured car loan)

☐ Statutory lien (such as tax lien, mechanic's lien)

☐ Judgment lien from a lawsuit

Other (including a right to offset)

Mortgage

Official Form 106D

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Debtor 1	Edward Michael	Pinkosky			Case number	(if known)			
	First Name	Middle Name	Last Name						
Date debt	was incurred		Last 4 digits of account number	8129		-			
Add the	dollar value of your e	ntries in Column	A on this page. Write that number h	ere:		\$381,362.9	9		
	the last page of your at number here:	form, add the dol	lar value totals from all pages.			\$381,362.9	9		

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 19-10017 Doc 1 Filed 01/17/19 Entered 01/17/19 14:05:23 Desc Main Document Page 20 of 60 Fill in this information to identify your case: Debtor 1 **Edward Michael Pinkosky** Middle Name Last Name First Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name United States Bankruptcy Court for the: WESTERN DISTRICT OF NORTH CAROLINA Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? ■ No. Go to Part 2.

List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

			Total claim	Priority amount	Nonpriority amount
2.1	Haywood Co Tax Collector	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name				
	215 N Main St #224	When was the debt incurred?		-	
	Waynesville, NC 28786				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check	all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	☐ Debtor 2 only	☐ Disputed			
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	$\square$ At least one of the debtors and another	☐ Domestic support obligations			
	$\square$ Check if this claim is for a community debt	Taxes and certain other debts you owe th	e government		
	Is the claim subject to offset?	☐ Claims for death or personal injury while y	ou were intoxicated		
	No	Other. Specify			
	☐ Yes	Notice Only			

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Document Page 21 of 60 Debtor 1 Edward Michael Pinkosky Case number (if known) \$28,000.00 2.2 **Internal Revenue Service** Last 4 digits of account number \$28,000.00 \$0.00 Priority Creditor's Name Attn Bankruptcy When was the debt incurred? PO Box 7346 Philadelphia, PA 19101-7346 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt lacksquare Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other, Specify 2009, 2013, 2014, 2015 Taxes owed ☐ Yes 2.3 **NC** Dept of Revenue \$0.00 \$0.00 Last 4 digits of account number \$0.00 Priority Creditor's Name When was the debt incurred? Attn Bankruptcy **PO Box 1168** Raleigh, NC 27602 As of the date you file, the claim is: Check all that apply Number Street City State ZIp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No Other, Specify ☐ Yes **Notice Only** 2.4 **US Attorneys Office** \$0.00 \$0.00 Last 4 digits of account number \$0.00 Priority Creditor's Name Ste 1650 Carillon Bldg When was the debt incurred? 227 W Trade Street

Charlotte, NC 28202 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: ☐ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes **Notice Only** 

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Dept	Edward Michael Pinkosky	Case number (if known)	
2.5	US Bankruptcy Administrator Priority Creditor's Name Western District of NC 402 West Trade St Ste 200 Charlotte, NC 28202	Last 4 digits of account number \$0.00  When was the debt incurred?	\$0.00
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only	□ Disputed	
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Domestic support obligations	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No ☐ Yes	■ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify Notice Only	
Part	2: List All of Your NONPRIORITY Unsecu	red Claims	
<b>4.</b> L	unsecured claim, list the creditor separately for each c	e alphabetical order of the creditor who holds each claim. If a creditor has more laim. For each claim listed, identify what type of claim it is. Do not list claims alread creditors in Part 3.If you have more than three nonpriority unsecured claims fill ou	y included in Part 1. If more
4.1	Paralaya Bank	Last 4 digits of account number	
4.1	Barclays Bank Nonpriority Creditor's Name PO Box 8802 Wilmington, DE 19899 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred?  As of the date you file, the claim is: Check all that apply	\$3,004.00 
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did report as priority claims	not
	No	Teport as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit card purchases	

Document Page 23 of 60 Debtor 1 Edward Michael Pinkosky Case number (if known) 4.2 **BB&T** \* Last 4 digits of account number \$2.000.00 Nonpriority Creditor's Name **Bankruptcy Dept** When was the debt incurred? PO Box 1847 Wilson, NC 27894-1847 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Line of Credit ☐ Yes 4.3 **Chase Card** Last 4 digits of account number \$2,314.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 15298 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card purchases ☐ Yes 4.4 **Dillards** Last 4 digits of account number \$587.00 Nonpriority Creditor's Name When was the debt incurred? Attn Bankruptcy Dept PO Box 103104 Roswell, GA 30076 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Credit card purchases

Is the claim subject to offset?

Document Page 24 of 60 Debtor 1 Edward Michael Pinkosky Case number (if known) \$308.00 4.5 First Path Last 4 digits of account number Nonpriority Creditor's Name c/o Doctors Business Bureau When was the debt incurred? 202 N Federal Hwy Lake Worth, FL 33460-3438 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Expense ☐ Yes 4.6 **First Premier** Last 4 digits of account number \$274.00 Nonpriority Creditor's Name When was the debt incurred? 3820 N Louise Ave Sioux Falls, SD 57107-0145 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card purchases ☐ Yes 4.7 Imperial Point EKG Associate Last 4 digits of account number \$75.00 Nonpriority Creditor's Name When was the debt incurred? c/o First Fed Credit Coll Agen 3440 Hollywood Blvd. #415 Hollywood, FL 33021 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

debt

■ No

☐ Yes

Is the claim subject to offset?

report as priority claims

■ Other. Specify Medical Expense

☐ Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

Page 25 of 60 Case number (if known) Document Debtor 1 Edward Michael Pinkosky

4.8	J. Scott Campbell Construction Company	Last 4 digits of account number	\$63,879.25
	Nonpriority Creditor's Name Tikkun A.S. Gottschalk, Attorney 75 North Market Street	When was the debt incurred?	
	Asheville, NC 28801  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Services Rendered	
4.9	Martin Winkler & Josef Resch Nonpriority Creditor's Name	Last 4 digits of account number	\$100,000.00
	c/o Gary M. Zeidwig PA 4849 N. dixie Hwy., Suite 103 & 104	When was the debt incurred?	
	Fort Lauderdale, FL 33334  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Loan Agreement	
4.1	North Broward Radiologists PA	Last 4 digits of account number	\$738.00
	Nonpriority Creditor's Name c/o Americollect Inc PO Box 1566	When was the debt incurred?	
	Manitowoc, WI 54221  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Expense	

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## Debtor 1 Edward Michael Pinkosky Document Page 26 of 60 Case number (if known)

Phoenix Emergency SVCS of Broward Co	Last 4 digits of account number	\$
Nonpriority Creditor's Name	<del></del>	
c/o Commonwealth Financial	When was the debt incurred?	
245 Main Street Dickson City, PA 18519-1641		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	

### Part 3: List Others to Be Notified About a Debt That You Already Listed

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				 -
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 28,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 28,000.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 173,179.25
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 173,179.25

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Document Page 27 of 60 Fill in this information to identify your case: Debtor 1 **Edward Michael Pinkosky** Middle Name Last Name First Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name United States Bankruptcy Court for the: WESTERN DISTRICT OF NORTH CAROLINA Case number (if known)

## ☐ Check if this is an amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	Company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				
	Number	Street			<u></u>
	City		State	ZIP Code	_

	Case 19-10017	Doc 1 Filed 01/1		J1/17/19 14:05 f 60	:23 Desc Main
Fill in thi	s information to identify yo		ent Paue 20 0	100	
Debtor 1	Edward Micha	el Pinkosky			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
	ates Bankruptcy Court for th				
Officed St	ates bankruptcy Court for th	e. WESTERN DISTRICT	JI NORTH CAROLINA		
Case nun (if known)	nber				☐ Check if this is an amended filing
Officia	al Form 106H				
		dobtoro			4044
sche	dule H: Your Co	debtors			12/15
ill it out, a our nam 1. Do	and number the entries in e and case number (if known pour pour parties) you have any codebtors?		n the Additional Page to	o this page. On the to	needed, copy the Additional Page, op of any Additional Pages, write
■ No					
		you lived in a community pi ana, Nevada, New Mexico, Pu			rty states and territories include )
	o. Go to line 3. es. Did your spouse, former s	spouse, or legal equivalent live	e with you at the time?		
in lin Form	e 2 again as a codebtor or	lly if that person is a guaran	tor or cosigner. Make s	sure you have listed	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State a	nd ZIP Code		Column 2: The cr Check all schedu	reditor to whom you owe the debt les that apply:
3.1	Name			□ Schedule D, lii □ Schedule E/F, □ Schedule G, li	line
	Number Street City	State	ZIP Code	_	
3.2	Name			_ ☐ Schedule D, lii☐ Schedule E/F,☐ Schedule G, li	line

Street

State

Number

City

ZIP Code

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C:II	in this information to identify your				•				
	in this information to identify your otor 1 Edward Mi	case. chael Pinkosky							
	otor 2	•							
	ted States Bankruptcy Court for the	ne: WESTERN DISTRICT	T OF NORTH CAROLIN	IA					
(If kr	se number		-		☐ A su	amended ipplemen	•	ostpetition chapter ving date:	
	fficial Form 106 <u>l</u> chedule I: Your Inc				MM	/ DD/ YY	YY		
sup spo atta	as complete and accurate as poplying correct information. If youse. If you are separated and you have a separate sheet to this form the separate sheet she	ou are married and not filit our spouse is not filing w n. On the top of any additi	ng jointly, and your sp ith you, do not include	ouse is live informati	ving with yo	ou, includ our spou	de informations. Ise. If more s	on about your space is needed,	
1.	Fill in your employment information.		Debtor 1		D	ebtor 2 d	or non-filing	spouse	
informati If you hav attach a s	If you have more than one job,					☐ Employed			
	attach a separate page with information about additional	ato page with		☐ Not employed			☐ Not employed		
	employers.	Occupation	C00						
	Include part-time, seasonal, or self-employed work.	Employer's name	Gosselin Graphic	s					
	Occupation may include studen or homemaker, if it applies.	t Employer's address	6500 NW 15th Ave Fort Lauderdale, I		) <u> </u>				
		How long employed t	here? 25 years						
Par	t 2: Give Details About M	onthly Income							
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to rep	ort for any	line, write \$6	0 in the s	pace. Include	your non-filing	
	u or your non-filing spouse have respace, attach a separate sheet		ombine the information f	or all empl	loyers for tha	at person	on the lines	below. If you need	
					For Debto	or 1	For Debtor		
2.	List monthly gross wages, sa deductions). If not paid monthly			2. \$	7,59	96.16	\$	N/A	
3.	Estimate and list monthly over	rtime pay.		3. +\$		0.00	+\$	N/A	

Calculate gross Income. Add line 2 + line 3.

\$ 7,596.16

N/A

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Debt	or 1	Edward Michael Pinkosky	_	С	ase number (if known)				
					For Debtor 1		r Debtor n-filing s		
	Cop	y line 4 here	4.		\$ 7,596.16	\$_		N/A	<u>\</u>
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$ 1,808.40	\$		N/A	١
	5b.	Mandatory contributions for retirement plans	5b	١.	\$ 0.00	\$		N/A	<u> </u>
	5c.	Voluntary contributions for retirement plans	5c		\$ 0.00	\$		N/A	<u>\</u>
	5d.	Required repayments of retirement fund loans	5d		\$0.00	. \$_		N/A	_
	5e.	Insurance	5e		\$ 0.00	. \$_		N/A	_
	5f. 5g.	Domestic support obligations Union dues	5f.		\$	\$_ \$		N/A	_
	5h.	Other deductions. Specify:	5g 5h		\$\$ \$0.00	. : —		N/A N/A	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$ 1,808.40	. · · · _ \$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		5,787.76			N/A	_
			٠.	`	3,767.76	Ψ_		IN/A	<u>`</u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	١.	\$ 0.00	\$		N/A	
	8b.	Interest and dividends	8b	١.	\$ 0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$0.00	\$_		N/A	
	8d.	Unemployment compensation	8d		\$0.00	_		N/A	_
	8e.	Social Security	8e	<del>)</del> .	\$0.00	. \$_		N/A	<u>\</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$0.00	\$_		N/A	
	8g.	Pension or retirement income	8g		\$ 0.00	. \$_		N/A	
	8h.	Other monthly income. Specify:	8h	1.+	\$ 0.00	+ \$_		N/A	<u>\</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_		N/	Α
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	5,787.76 + \$		N/A	= \$	5,787.76
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	.0.	Ψ_	<u> </u>		11//		3,707.70
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your prize friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a second contribution.	depe			•	Schedule	e J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					e. 12.	\$	5,787.76
13.	Do	you expect an increase or decrease within the year after you file this form	?					Combi	ined Ily income
		No.							
		Voc Evoloin:							

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Fill in this information to identify your case:			
Debtor 1Edward Michael Pinkosky		if this is:	
Debtor 2 (Spouse, if filing)	_ A	supplement show	ving postpetition chapter the following date:
			ine following date.
United States Bankruptcy Court for the: WESTERN DISTRICT OF NORTH CAROLINA	М	M / DD / YYYY	
Case number (If known)			
Official Form 106J			
Schedule J: Your Expenses  Be as complete and accurate as possible. If two married people are filing together,	hoth are equal	v rosponsible fo	12/15
information. If more space is needed, attach another sheet to this form. On the top number (if known). Answer every question.			
Part 1: Describe Your Household  1. Is this a joint case?			
■ No. Go to line 2.			
☐ Yes. Does Debtor 2 live in a separate household?			
□ No			
☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate House	sehold of Debtor	· 2.	
2. Do you have dependents? ■ No			
Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent Dependent's relative each dependent		Dependent's age	Does dependent live with you?
Do not state the			□ No
dependents names.			☐ Yes ☐ No
			□ Yes
			□ No
			☐ Yes
			□ No □ Yes
3. Do your expenses include			□ res
expenses of people other than yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses			
Estimate your expenses as of your bankruptcy filing date unless you are using this expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedu</i> applicable date.			
Include expenses paid for with non-cash government assistance if you know			
the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)		Your expe	enses
<ol> <li>The rental or home ownership expenses for your residence. Include first mortga payments and any rent for the ground or lot.</li> </ol>	ige 4. \$		2,032.94
If not included in line 4:			
4a. Real estate taxes	4a. \$		0.00
4b. Property, homeowner's, or renter's insurance	4b. \$		0.00
4c. Home maintenance, repair, and upkeep expenses	4c. \$		150.00
<ul><li>4d. Homeowner's association or condominium dues</li><li>5. Additional mortgage payments for your residence, such as home equity loans</li></ul>	4d. \$ 5. \$		63.00 0.00

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Debtor '	Edward	lichael Pinkosky	Case num	ber (if kno	wn)
S. Uti	lities:				
6a.		neat, natural gas	6a.	\$	350.00
6b.		er, garbage collection	6b.	·	0.00
6c.	•	cell phone, Internet, satellite, and cable services	6c.	· · —	425.00
6d.		•	6d.	· —	0.00
. Fo		keeping supplies	7.	\$	700.00
		nildren's education costs	8.	\$	0.00
_		y, and dry cleaning	9.	<b>\$</b> —	125.00
	<u> </u>	oducts and services	10.	<b>\$</b> —	50.00
	dical and den		11.	· · —	700.00
		nclude gas, maintenance, bus or train fare.	11.	Ψ	700.00
	not include ca		12.	\$	300.00
		lubs, recreation, newspapers, magazines, and bo	ooks 13.	\$	70.00
		ibutions and religious donations	14.	· —	0.00
	urance.			· —	0.00
		surance deducted from your pay or included in lines	1 or 20.		
	a. Life insurar	, , ,	15a.	\$	0.00
151	o. Health insu	rance	15b.	\$	750.00
150	c. Vehicle ins	urance	15c.	\$	68.00
150	d. Other insur	ance. Specify:	15d.	\$	0.00
		lude taxes deducted from your pay or included in lin		· —	0.00
	ecify:	Jour pay or moradou in init	16.	\$	0.00
•		ase payments:		-	<del>-</del>
		nts for Vehicle 1	17a.	\$	0.00
171	o. Car payme	nts for Vehicle 2	17b.	\$	0.00
170	c. Other. Spec	cify:	17c.	\$	0.00
	d. Other. Spe	·	17d.	\$	0.00
	•	of alimony, maintenance, and support that you di		·	
		our pay on line 5, Schedule I, Your Income (Offic		\$	0.00
9. <b>Ot</b> l	ner payments	you make to support others who do not live with	you.	\$	0.00
Sp	ecify:		19.		
		rty expenses not included in lines 4 or 5 of this for	orm or on Schedule I: Yo	our Incon	ne.
20	a. Mortgages	on other property	20a.		0.00
201	<ol> <li>Real estate</li> </ol>	taxes	20b.	·	0.00
200	c. Property, h	omeowner's, or renter's insurance	20c.	\$	0.00
200	d. Maintenand	ce, repair, and upkeep expenses	20d.	\$	0.00
20	e. Homeowne	r's association or condominium dues	20e.	\$	0.00
1. <b>Ot</b> l	ner: Specify:		21.	+\$	0.00
	•	nonthly expenses			
	a. Add lines 4 t	•		\$	5,783.94
221	o. Copy line 22	(monthly expenses for Debtor 2), if any, from Officia	I Form 106J-2	\$	
220	c. Add line 22a	and 22b. The result is your monthly expenses.		\$	5,783.94
o o-	laulataa	anthly not income			
	-	nonthly net income.	00-	¢	F 707 70
		2 (your combined monthly income) from Schedule I.	23a.		5,787.76
231	o. Copy your	monthly expenses from line 22c above.	23b.	-\$	5,783.94
00	Cubina at	us monthly avanges from the same at the language			
230	•	our monthly expenses from your monthly income.	23c.	\$	3.82
	rne result i	s your monthly net income.	200.	_	0.02
24. <b>Do</b>	VOII expect a	n increase or decrease in your expenses within t	he vear after you file this	form?	
		expect to finish paying for your car loan within the year or			o increase or decrease because of a
		erms of your mortgage?	, <sub> </sub> ,	, ,	
	No.				
		Explain here:			

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Fill in th	is information to identify you	ır case:			
Debtor 1	Edward Michae				
D - l- ( 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f		Middle Name	Last Name		
		WESTERN BISTRIST	25 NODTH 0 A DOUNA		
United St	tates Bankruptcy Court for the	: WESTERN DISTRICT (	OF NORTH CAROLINA		
Case nur	mber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106Dec				
Decl	aration About	an Individual	<b>Debtor's Sch</b>	edules	12/15
f two ma	rried people are filing togeth	ner, both are equally respo	nsible for supplying correc	t information.	
You must	t file this form whenever you	ı file hankruntov schedules	s or amended schedules M	aking a false statement ic	oncealing property or
	money or property by frauc				
years, or	both. 18 U.S.C. §§ 152, 1341	, 1519, and 3571.		•	
	Sian Polow				
	Sign Below				
Did	you pay or agree to pay son	neone who is NOT an attor	ney to help you fill out han	kruntov forme?	
Diu	you pay or agree to pay son	neone who is NOT all attor	ney to neip you iii out ban	kiupicy ioinis:	
	No				
_	Voc. Name of parson			Attach Pankruntau [	Potition Proporaria Nation
Ц	Yes. Name of person				Petition Preparer's Notice, gnature (Official Form 119)
					, (
	er penalty of perjury, I decla they are true and correct.	re that I have read the sum	mary and schedules filed w	ith this declaration and	
tilat	they are true and correct.				
<b>X</b>	/s/ Edward Michael Pinko	sky	X		
	Edward Michael Pinkosky	y	Signature of De	btor 2	
	Signature of Debtor 1				
	Date <b>January 17, 2019</b>		Date		
	Juniaury 11, 2013				

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De	btor 1	Edward Michael	Pinkosky			
		First Name	Middle Name	Last Name		
		First Name	Middle Name	Last Name		
First Name						
UII	ileu Siales Da	inkruptcy Court for the.	WESTERN DISTRICT OF	NORTHCAROLINA		
1						☐ Check if this is an amended filing
			Affairs for Individ	duals Filing for	Bankruptcy	4/10
info	rmation. If m	ore space is needed,	attach a separate sheet to			
Pa	rt 1: Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	s?			
	☐ Married					
	■ Not mar	rried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	Yes. Lis	st all of the places you I	ived in the last 3 years. Do no	ot include where you live no	ow.	
	Debtor 1 Pr	ior Address:		Debtor 2 Prior A	Address:	Dates Debtor 2 lived there
			2014- Decemb		r 1	☐ Same as Debtor 1 From-To:
	es and territor	<i>ies</i> include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto		
Pa	rt 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operating ureceived from all jobs and a have income that you received.	all businesses, including pa	rt-time activities.	calendar years?
	□ No ■ Yes. Fill	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$5,697.12	☐ Wages, commission bonuses, tips	ns,
			☐ Operating a business		☐ Operating a busines	SS

Page 35 of 60 Case number (if known) Document Debtor 1 Edward Michael Pinkosky

					Dahtan 4				D-	h4 0		
					Debtor 1 Sources of inc			income e deductions and	So	btor 2 urces of inco eck all that ap		Gross income (before deductions
					Check all that a	арріу.	exclus		CII	eck all that ap	ipiy.	and exclusions)
			dar year: December :	31, 2018 )	■ Wages, combonuses, tips	nmissions,		\$106,561.17		Wages, comr nuses, tips	nissions,	
					☐ Operating a	business				Operating a b	usiness	
For the calendar year before that: (January 1 to December 31, 2017)		■ Wages, combonuses, tips	nmissions,	\$98,851.00			Wages, comr nuses, tips	nissions,				
					☐ Operating a	business				Operating a b	usiness	
For	r the nuar	calend y 1 to	dar year: December :	31, 2016 )	■ Wages, combonuses, tips	nmissions,		\$57,034.00		Wages, comr nuses, tips	nissions,	
					☐ Operating a	business				Operating a b	ousiness	
	winr	ings. each s No	f you are fili	ng a joint cas	e and you have i	income that y	ou receiv	ends; money colle ed together, list it ot include income	only o	nce under De	btor 1.	d gambling and lottery
					Debtor 1 Sources of inc Describe below		each s		So	btor 2 urces of inco scribe below.	ome	Gross income (before deductions
							exclus	e deductions and ons)				and exclusions)
Pa	rt 3:	List	Certain Pa	yments You	Made Before Yo	ou Filed for E	Bankrupt	су				
6.	Are □	<b>eithe</b> i No.	Neither De	btor 1 nor D	s debts primari ebtor 2 has prir personal, family	narily consu	mer deb		bts are	defined in 11	U.S.C. § 10 <sup>-</sup>	1(8) as "incurred by an
						ankruptcy, did	d you pay	any creditor a tot	tal of \$6	6,425* or more	э?	
			□ No. □ Yes	paid that cre not include	each creditor to we aditor. Do not incompayments to an a	lude payment attorney for th	ts for don nis bankru	nestic support obl	ligation	s, such as chi	ld support a	ne total amount you nd alimony. Also, do
	•	Yes.	Debtor 1 c	or Debtor 2 o	r both have prin	narily consu	mer deb					
			□ No.	Go to line 7								
			■ Yes	include pay		tic support ob		f \$600 or more ar , such as child su				t creditor. Do not nclude payments to an
	Cre	ditor'	s Name and	l Address	Date	es of payme	nt	Total amount paid	An	nount you still owe	Was this p	payment for

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Debtor 1 Edward Michael Pinkosky	Page 36 of 60 Case number (if known)
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Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for .	
Wells Fargo Bank PO Box 522 Des Moines, IA 50306-0522	October, November, December	\$6,058.05	\$379,470.99	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other	
Insiders include your relatives; any general poor which you are an officer, director, person in a business you operate as a sole proprietor.	artners; relatives of any genomination control, or owner of 20%	neral partners; partn or more of their votin	erships of which you	u are a general partner; cony managing agent, includi	ing one fo
■ No					
☐ Yes. List all payments to an insider.					
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payme	nt
Within 1 year before you filed for bankrupt	cy, did you make any pa	yments or transfer	any property on a	ccount of a debt that ber	nefited an
insider?		,			
include payments on debts guaranteed or cos	signed by an insider.				
No					
☐ Yes. List all payments to an insider					
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payme Include creditor's name	ent
dontify Logal Actions Panassassia	ne and Forcelosures				
List all such matters, including personal injury					
□ No					
Yes. Fill in the details.	Natura of the control	0		Status of the same	
	Nature of the case	Court or agency	,	Status of the case	
Yes. Fill in the details.  Case title	Nature of the case Collections	Court or agency Broward Coun 201 SE 6th Str Fort Lauderda	ity, Florida eet	Status of the case  Pending On appeal Concluded	
Yes. Fill in the details.  Case title Case number  Martin Winkler & Josef Resch vs.  Edward M. Pinkosky		Broward Coun 201 SE 6th Str	nty, Florida eet le, FL 33301 nty Clerk of n St, Suite	■ Pending □ On appeal	
Yes. Fill in the details.  Case title Case number  Martin Winkler & Josef Resch vs. Edward M. Pinkosky CACE 18-014692  J.Scott Campbell Construction Company, INC vs. Edward M. Pinkosky	Collections  Collections	Broward Coun 201 SE 6th Str Fort Lauderda Haywood Cou Court 285 North Maii 1500 Waynesville, N	nty, Florida eet le, FL 33301 nty Clerk of n St, Suite	Pending On appeal Concluded Pending On appeal Concluded	r levied?
Yes. Fill in the details.  Case title Case number  Martin Winkler & Josef Resch vs. Edward M. Pinkosky CACE 18-014692  J.Scott Campbell Construction Company, INC vs. Edward M. Pinkosky 11 CVS 292  Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo  No. Go to line 11.	Collections  Collections	Broward Coun 201 SE 6th Str Fort Lauderda Haywood Cou Court 285 North Main 1500 Waynesville, N	nty, Florida eet le, FL 33301 nty Clerk of n St, Suite	Pending On appeal Concluded Pending On appeal Concluded	r levied?
Yes. Fill in the details.  Case title Case number  Martin Winkler & Josef Resch vs. Edward M. Pinkosky CACE 18-014692  J.Scott Campbell Construction Company, INC vs. Edward M. Pinkosky 11 CVS 292  Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo  No. Go to line 11.  Yes. Fill in the information below.	Collections  Collections  ccy, was any of your propw.	Broward Coun 201 SE 6th Str Fort Lauderda  Haywood Cou Court 285 North Main 1500 Waynesville, N	nty, Florida eet le, FL 33301 nty Clerk of n St, Suite IC 28786	Pending On appeal Concluded Pending On appeal Concluded	
Yes. Fill in the details.  Case title Case number  Martin Winkler & Josef Resch vs. Edward M. Pinkosky CACE 18-014692  J.Scott Campbell Construction Company, INC vs. Edward M. Pinkosky 11 CVS 292  Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo  No. Go to line 11.	Collections  Collections	Broward Coun 201 SE 6th Str Fort Lauderda  Haywood Cou Court 285 North Main 1500 Waynesville, N	nty, Florida eet le, FL 33301 nty Clerk of n St, Suite	Pending On appeal Concluded Pending On appeal Concluded	r levied?
	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. A alimony.  No Yes. List all payments to an insider. Insider's Name and Address  Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost No Yes. List all payments to an insider Insider's Name and Address  List all payments to an insider Insider's Name and Address  Identify Legal Actions, Repossessio Within 1 year before you filed for bankrupt insider's Name and Address	Within 1 year before you filed for bankruptcy, did you make a paym Insiders include your relatives; any general partners; relatives of any ge of which you are an officer, director, person in control, or owner of 20% a business you operate as a sole proprietor. 11 U.S.C. § 101. Include palimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Dates of payment  Within 1 year before you filed for bankruptcy, did you make any painsider?  Include payments on debts guaranteed or cosigned by an insider.  No Yes. List all payments to an insider  Insider's Name and Address  Dates of payment  List all payments to an insider  Insider's Name and Address  Dates of payment  Within 1 year before you filed for bankruptcy, were you a party in a List all such matters, including personal injury cases, small claims action	Wells Fargo Bank PO Box 522 Des Moines, IA 50306-0522  Within 1 year before you filed for bankruptcy, did you make a payment on a debt you of Insiders include your relatives; any general partners; relatives of any general partners; partn of which you are an officer, director, person in control, or owner of 20% or more of their votin a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic alimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Dates of payment Total amount paid  Within 1 year before you filed for bankruptcy, did you make any payments or transfer insider? Include payments on debts guaranteed or cosigned by an insider.  No Yes. List all payments to an insider Insider's Name and Address  Dates of payment Total amount paid  Italianount paid  Italianount paid  Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court act List all such matters, including personal injury cases, small claims actions, divorces, collectic	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you for which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and as a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligation alimony.  No Yes. List all payments to an insider.  Insider's Name and Address Dates of payment Total amount paid Amount you still owe  Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on a insider? Include payments on debts guaranteed or cosigned by an insider.  No Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount Amount you still owe  description of payment Amount you still owe  List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity a	Wells Fargo Bank PO Box 522 Des Moines, IA 50306-0522 Des Moines, IA 50306-0522  Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Within 1 year before you filed for bankruptcy, did you make any payments for domestic support obligations, such as child support an alimony.  No Yes. List all payments to an insider.  Insider's Name and Address  Dates of payment  Total amount paid  Amount you still owe  Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that ber insider?  Include payments on debts guaranteed or cosigned by an insider.  No Yes. List all payments to an insider  Insider's Name and Address  Dates of payment  Total amount paid  Amount you Reason for this payme include payments on transfer any property on account of a debt that ber insider?  Include payments to an insider  Insider's Name and Address  Dates of payment  Total amount paid  Amount you Reason for this payme include creditor's name and include creditor's name and include creditor's name and include creditor's name and include payments on this payments on transfer any property on account of a debt that ber insider.  Insider's Name and Address  Dates of payment  Total amount paid  Amount you Reason for this payment paid  Amount you payments on debts guaranteed or cosigned by an insider.

Entered 01/17/19 14:05:23 Desc Main Case 19-10017 Doc 1 Filed 01/17/19 Page 37 of 60 Case number (if known) Document Debtor 1 Edward Michael Pinkosky 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your 1:

	accounts or refuse to make a payment by No  Yes. Fill in the details.	ecause you owed a debt?	· · · · · · · · · · · · · · · · · · ·	,,,,			
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount			
	court-appointed receiver, a custodian, o  No Yes		assignee for the benef	fit of creditors, a			
Par	t 5: List Certain Gifts and Contribution	IS .					
13.	Within 2 years before you filed for banks  ■ No  □ Yes. Fill in the details for each gift.  Gifts with a total value of more than \$66 per person  Person to Whom You Gave the Gift and Address:	·	Dates you gave the gifts	Value			
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  ■ No □ Yes. Fill in the details for each gift or contribution.						
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	· ·	Dates you contributed	Value			
Par	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankru or gambling?  ■ No □ Yes. Fill in the details.	ptcy or since you filed for bankruptcy, did you lose any	thing because of theft	, fire, other disaster			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	Date of your loss	Value of property lost			
Par	t 7: List Certain Payments or Transfer	s					
16.	consulted about seeking bankruptcy or	uptcy, did you or anyone else acting on your behalf pay operaring a bankruptcy petition? Desparers, or credit counseling agencies for services require		ty to anyone you			

□ No

Yes. Fill in the details.

Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Leonard & Moore PLLC 274 Merrimon Avenue Asheville, NC 28801	Chapter 7 court filing fee \$335, credit counseling \$25, financial management education course \$12, Attorney's fee \$1,628	January 17, 2019	\$2,000.00

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Debtor 1 Edward Michael Pinkosky

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any prope promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.					erty to anyone who			
	■ No							
		Yes. Fill in the details.						
	Person Who Was Paid Address	Description and v transferred	alue of any proper	ty Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bankrup transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alread No	business or financial affa nade as security (such as t	airs? the granting of a sec					
	☐ Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and very property transfer		Describe any property or payments received or debts paid in exchange	Date transfer was made			
	Person's relationship to you							
19.	Within 10 years before you filed for bankrubeneficiary? (These are often called asset-p  ■ No □ Yes. Fill in the details.		y property to a sel	f-settled trust or similar device	of which you are a			
	Name of trust	Description and value of the property transferred Date Transfer was						
	Name of trust Description and value of the property transferred Date made							
Par	t 8: List of Certain Financial Accounts, I	nstruments, Safe Deposi	t Boxes, and Stora	ge Units				
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, assolution No  Yes. Fill in the details.	or other financial accoun	nts; certificates of					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, any s	afe deposit box or other depos	sitory for securities,			
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?			
22.	Have you stored property in a storage unit		home within 1 year	ar before you filed for bankrupt	cy?			
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?			

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Debtor 1 Edward Michael Pinkosky

Par	19: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that someofor someone.	one else owns? Include any prope	rty you borrowed from, are storing fo	r, or hold in trust				
	No No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Par	t 10: Give Details About Environmental Inform	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.							
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	sites.						
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,				
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.					
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e under or in violation of an environm	ental law?				
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any release of hazardous material?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or admini	strative proceeding under any env	ironmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or Con	nnections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of the following connections to an	y business?				
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either full-time or part-time					
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	nip (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing execu	tive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation							

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No. None of the above applies. Go to Part 12.				
	☐ Yes. Check all that apply above and fill	in the details below for each business.		
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed	
28.	Within 2 years before you filed for bankrupte institutions, creditors, or other parties.  No Yes. Fill in the details below.	cy, did you give a financial statement to an	yone about your business? Include all financial	
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Pai	t 12: Sign Below			
are with 18 U	rue and correct. I understand that making a a bankruptcy case can result in fines up to \$ .S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, or ob	leclare under penalty of perjury that the answers otaining money or property by fraud in connection rs, or both.	
Ed	Edward Michael Pinkosky ward Michael Pinkosky nature of Debtor 1	Signature of Debtor 2		
Da	e _January 17, 2019	Date		
Did ■ N	·	nt of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?	
Did ■ N	you pay or agree to pay someone who is not	an attorney to help you fill out bankruptcy	forms?	
	es. Name of Person . Attach the Bankrup	otcy Petition Preparer's Notice, Declaration, a	nd Signature (Official Form 119).	

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Fill in this infor	mation to identify your	case:		
Debtor 1	Edward Michael F			
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DIST	RICT OF NORTH CAROLINA	
Case number				
(if known)				Check if this is an amended filing
Official Fo	orm 108			
Stateme	nt of Intentio	n for Indiv	iduals Filing Under Chapt	er 7 12/15
If you are an inc	lividual filing under cha	ntor 7 vou must fi	Il out this form if:	
	lividual filing under cha re claims secured by yo	-	ii out this form ii:	
	sed personal property a		oot expired.	
	ever is earlier, unless th		you file your bankruptcy petition or by the date see time for cause. You must also send copies to the	
	eople are filing together nd date the form.	in a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
Be as complete	and accurate as possib	le. If more space is	s needed, attach a separate sheet to this form. Or	n the top of any additional pages.
	our name and case num			, , , , , , , , , , , , , , , , , , , ,
Part 1: List Y	our Creditors Who Have	e Secured Claims		
1. For any credi	-	art 1 of Schedule D	Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
	reditor and the property t	hat is collateral	What do you intend to do with the property that	
			secures a debt?	as exempt on Schedule C?
Creditor's	Havertys Furniture		_	_
name:	naverty's Furniture		<ul><li>Surrender the property.</li><li>Retain the property and redeem it.</li></ul>	■ No
name.			☐ Retain the property and redeem it.	☐ Yes
Description of		), 2 - night	Reaffirmation Agreement.	
property	stands \$100		☐ Retain the property and [explain]:	
securing debt	I.			
Creditor's \	Wells Fargo Bank		Companded the acceptant	□ No
name:	Wells Falgo Balik		<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	□ NO
			☐ Retain the property and enter into a	Yes
Description of	f 29 Buster Drive Wa 28786 Haywood C		Reaffirmation Agreement.	
property securing debt	Haywood County t	ax value on	■ Retain the property and [explain]:	
Sociality debt	1.44 acres (resider bedrooms, 2 1/2 ba		continue monthly payments	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Edward Michael Pinkosky	Case number (if known)
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention property that is subject to an unexpired lease.	about any property of my estate that secures a debt and any personal
X /s/ Edward Michael Pinkosky	X
Edward Michael Pinkosky Signature of Debtor 1	Signature of Debtor 2
Date	Date

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Fill in this information to identify your case:	Check one box only as directed in this form and in Form
Debtor 1 Edward Michael Pinkosky	122A-1Supp:
Debtor 2	There is no processor of above
(Spouse, if filing)	☐ 1. There is no presumption of abuse
United States Bankruptcy Court for the: Western District of North Carolina	2. The calculation to determine if a presumption of abuse
<u> </u>	applies will be made under Chapter 7 Means Test
Case number	Calculation (Official Form 122A-2).
(if known)	3. The Means Test does not apply now because of qualified military service but it could apply later.
	☐ Check if this is an amended filing
Official Form 122A - 1	Ç
	Incomo
Chapter 7 Statement of Your Current Monthly	Income 12/1
Be as complete and accurate as possible. If two married people are filing together, both are attach a separate sheet to this form. Include the line number to which the additional inform case number (if known). If you believe that you are exempted from a presumption of abuse qualifying military service, complete and file Statement of Exemption from Presumption of Part 1:  Calculate Your Current Monthly Income	nation applies. On the top of any additional pages, write your name an e because you do not have primarily consumer debts or because of
What is your marital and filing status? Check one only.	
■ Not married. Fill out Column A, lines 2-11.	
☐ Married and your spouse is filing with you. Fill out both Columns A and B	3, lines 2-11.
☐ Married and your spouse is NOT filing with you. You and your spouse a	are:
☐ Living in the same household and are not legally separated. Fill out bo	
☐ Living separately or are legally separated. Fill out Column A, lines 2-11:	•
penalty of perjury that you and your spouse are legally separated under n living apart for reasons that do not include evading the Means Test require	nonbankruptcy law that applies or that you and your spouse are
Fill in the average monthly income that you received from all sources, derived during the 101(10A). For example, if you are filing on September 15, the 6-month period would be March the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not spouses own the same rental property, put the income from that property in one column only.	h 1 through August 31. If the amount of your monthly income varied during out include any income amount more than once. For example, if both
	Column A  Debtor 1  Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before payroll deductions).	ore all \$\$ <b>7,596.16</b> \$
Alimony and maintenance payments. Do not include payments from a spouse Column B is filled in.	se if \$ \$
4. All amounts from any source which are regularly paid for household experion of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, pare and roommates. Include regular contributions from a spouse only if Column B is filled in. Do not include payments you listed on line 3.	utions ents,
5. Net income from operating a business, profession, or farm	
Debtor 1	
Gross receipts (before all deductions) \$	
Ordinary and necessary operating expenses -\$0.00	
Net monthly income from a business, profession, or farm \$ Copy h	nere -> \$ \$
6. Net income from rental and other real property	
Debtor 1	
Gross receipts (before all deductions) \$ 0.00	
Ordinary and necessary operating expenses -\$ 0.00	
Net monthly income from rental or other real property \$0.00 Copy h	
7. Interest, dividends, and royalties	\$\$

Official Form 122A-1

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**Edward Michael Pinkosky** Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 \$ benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. \$ 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 7.596.16 \$ \$ 7,596.16 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 7,596.16 Multiply by 12 (the number of months in a year) 12 91,153.92 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: NC Fill in the state in which you live. Fill in the number of people in your household. 1 47,470.00 Fill in the median family income for your state and size of household. 13. \$ To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Edward Michael Pinkosky **Edward Michael Pinkosky** Signature of Debtor 1 Date January 17, 2019

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

MM / DD / YYYY

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	Documen	t Page 45 of 60
Fill	in this information to identify your case:	Check the appropriate box as directed in lines 40 or 42:
Deb	otor 1 Edward Michael Pinkosky	IIIIes 40 01 42.
Deb	otor 2	According to the calculations required by this Statement:
	ouse, if filing)	
Unit	ted States Bankruptcy Court for the: Western District of North Ca	■ 1. There is no presumption of abuse.
Coo	number -	□ 2. There is a presumption of abuse.
	e number nown)	
		☐ Check if this is an amended filing
Of	ficial Form 122A - 2	•
	napter 7 Means Test Calculation	04/16
Be a	is complete and accurate as possible. If two married people are is needed, attach a separate sheet to this form, Include the tional pages, write your name and case number (if known).	7 Statement of Your Current Monthly Income (Official Form 122A-1). e filing together, both are equally responsible for being accurate. If more ine number to which additional information applies. On the top any
1.	Copy your total current monthly income. Cop	y line 11 from Official Form 122A-1 here=> \$\$
2.	Did you fill out Column B in Part 1 of Form 122A-1?	
	■ No. Fill in \$0 for the total on line 3.	
	☐ Yes. Is your spouse Filing with you?	
	☐ No. Go to line 3.	
	☐ Yes. Fill in \$0 for the total on line 3.	
3.	Adjust your current monthly income by subtracting any part household expenses of you or your dependents. Follow these	

On line 11, Column B of Form 122A-1, was any amount of the income you reported for your spouse NOT regularly used for the household

are subtracting from For example, the income is used to pay your spouse's tax debt or to your spouse's income support other than you or your dependents.

0.00 Total.

Copy total here=>... - \$ 0.00

Fill in the amount you

Adjust your current monthly income. Subtract line 3 from line 1.

State each purpose for which the income was used

7,596.16

expenses of you or your dependents?

No. Fill in 0 for the total on line 3. ☐ Yes. Fill in the information below:

Doc 1 Filed 01/17/19 Entered 01/17/19 14:05:23 Case 19-10017 Desc Main Page 46 of 60 Document Debtor 1 **Edward Michael Pinkosky** Case number (if known) Part 2: Calculate Your Deductions from Your Income The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office. Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1. If your expenses differ from month to month, enter the average expense. Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in. The number of people used in determining your deductions from income Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household. **National Standards** You must use the IRS National Standards to answer the questions in lines 6-7. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National 700.00 Standards, fill in the dollar amount for food, clothing, and other items. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22. People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 52 7b. Number of people who are under 65 1 7c. Subtotal. Multiply line 7a by line 7b. 52.00 52.00 Copy here=> People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 Subtotal. Multiply line 7d by line 7e. 0.00 0.00 Copy here=>

52.00

Copy total here=>

7g. Total. Add line 7c and line 7f

52.00

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Debtor 1 Edward Michael Pinkosky

Case number (if known)

Loc	al Sta	andards	You mus	st use the l	IRS Local S	Standards to a	answer the o	questions in lin	ies 8-15.					
				the IRS, t		rustee Progra	ım has divi	ded the IRS L	ocal Stanc	dard fo	r housir	ng for		
■ F	łousi	ing and u	ıtilities - lı	nsurance	and opera	iting expense	s							
■ H	łousi	ing and u	ıtilities - N	Mortgage o	or rent exp	penses								
To a	answ	er the qu	estions ir	n lines 8-9	, use the l	J.S. Trustee F	Program ch	art.						
						d in the separa y clerk's office		ons for this for	m.					
8.		_			•	• .		the number of expenses				5, fill \$		467.00
9.	Hou	ising and	l utilities -	Mortgage	e or rent e	xpenses:								
	9a.	•			•	d in line 5, fill i ent expenses				:	\$	770.00		
	9b.	Total ave	erage mor	nthly paym	ent for all n	mortgages and	d other debt	s secured by y	our home.					
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.													
		Name of	the credit	cor			Averag payme	e monthly nt						
		Wells F	argo Ba	nk			\$	2,032.96						
				Total ave	erage mont	thly payment	\$	2,032.96	Copy here=>	-\$	2	2,032.96	Repeat this amount on line 33a.	
	9c.	Net mort	tgage or re	ent expens	e.									
						<i>payment</i> ) fron than \$0, enter			\$		0.00	Copy here=>	\$	0.00
10.								ocal Standard ional amount			correct	and	\$	0.00
	Ex	plain why:	:											
11.	Loc	al transp	ortation e	expenses:	Check the	number of ve	hicles for w	hich you claim	an owners	hip or o	perating	expense.		
		). Go to lin	ne 14.											
	<b>■</b> 1	. Go to lin	ne 12.											
	□ 2	or more.	Go to line	12.										

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the

operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

397.00

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Document Page 48 of 60 **Edward Michael Pinkosky** Case number (if known)

13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan of more than two vehicles.					
Vel	nicle 1 Describe Vehicle 1:					
13a.	Ownership or leasing costs using IRS Local Standard		\$	0.00		
13b.	Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 month bankruptcy. Then divide by 60.		t			
	Name of each creditor for Vehicle 1	Average monthly payment				
	-NONE-	\$				
	Total Average Monthly Payment	\$0.00	Copy here => -\$	0	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$0,	enter \$0.	\$	0.00	Copy net Vehicle 1 expense here => \$	0.00
Vel	nicle 2 Describe Vehicle 2:					
13d.	Ownership or leasing costs using IRS Local Standard		. \$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	Do not include costs for	r			
	Name of each creditor for Vehicle 2	Average monthly payment				
		\$				
	Total Average Monthly Payment	\$	Copy here => -\$	0.00	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this amount is less than \$0,	enter \$0	\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
14.	<b>Public transportation expense:</b> If you claimed 0 vehicles in <i>Transportation</i> expense allowance regardless of whether you			fill in the <i>I</i>	Public \$	500.00
15.	<b>Additional public transportation expense:</b> If you claimed 1 also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Transp</i>	hat you believe is the ap				0.00

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Debtor 1 Edward Michael Pinkosky Case number (if known)

Oth	ther Necessary Expenses In addition to the expense deductions listed above, you are allowed y the following IRS categories.	our monthly expenses for	
16.	6. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly a your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expeand subtract that number from the total monthly amount that is withheld to pay for taxes.	mount withheld from	
	Do not include real estate, sales, or use taxes.	\$_	1,808.40
17.	<ol><li>Involuntary deductions: The total monthly payroll deductions that your job requires, such as reti contributions, union dues, and uniform costs.</li></ol>	rement	
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions of	or payroll savings.	0.00
18.	8. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two filling together, include payments that you make for your spouse's term life insurance. Do not incluinsurance on your dependents, for a non-filling spouse's life insurance, or for any form of life insurance.	de premiums for life	0.00
19.	<ol><li>Court-ordered payments: The total monthly amount that you pay as required by the order of a cadministrative agency, such as spousal or child support payments.</li></ol>	ourt or	
	Do not include payments on past due obligations for spousal or child support. You will list these of	bligations in line 35. \$_	0.00
20.	<ul><li>Education: The total monthly amount that you pay for education that is either required:</li><li>as a condition for your job, or</li></ul>		
	for your physically or mentally challenged dependent child if no public education is available for	or similar services.	0.00
21.	1. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nu	sery, and preschool.	
	Do not include payments for any elementary or secondary school education.	\$_	0.00
22.	<ol> <li>Additional health care expenses, excluding insurance costs: The monthly amount that you p that is required for the health and welfare of you or your dependents and that is not reimbursed b by a health savings account. Include only the amount that is more than the total entered in line 7.</li> </ol>	insurance or paid	740.00
	Payments for health insurance or health savings accounts should be listed only in line 25.	\$ <sub>_</sub>	748.00
23.	3. Optional telephone and telephone services: The total monthly amount that you pay for telecon for you and your dependents, such as pagers, call waiting, caller identification, special long distar phone service, to the extent necessary for your health and welfare or that of your dependents or fincome, if it is not reimbursed by your employer.	ice, or business cell	
	Do not include payments for basic home telephone, internet and cell phone service. Do not include expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously		0.00
24.	<ol> <li>Add all of the expenses allowed under the IRS expense allowances.</li> <li>Add lines 6 through 23.</li> </ol>	\$	4,672.40

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Debtor 1 Edward Michael Pinkosky Case number (if known)

Additional Expense Deductions These are additional deductions allowed by the Means Test.						
	Note: Do not include any expense allowances listed in lines 6-24.					
25.	. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.					
	Health insurance	\$ 750.00				
	Disability insurance	\$0.00_				
	Health savings account	\$ 0.00				
	Total :	\$ 750.00	Copy total here=>	\$	750.00	
	Do you actually spend this total amount?		J			
	No. How much do you actually spend?	•				
	. 33	\$				
26.	Continued contributions to the care of household or fa continue to pay for the reasonable and necessary care and					
	your household or member of your immediate family who is include contributions to an account of a qualified ABLE pro	s unable to pay for su	uch expenses. These expenses may	\$	0.00	
27.	<b>Protection against family violence.</b> The reasonably necessafety of you and your family under the Family Violence Pr					
	By law, the court must keep the nature of these expenses	confidential.		\$	0.00	
28.	Additional home energy costs. Your home energy costs	are included in your	insurance and operating expenses on			
	line 8.					
	If you believe that you have home energy costs that are me 8, then fill in the excess amount of home energy costs.	ore than the home er	nergy costs included in expenses on line			
	You must give your case trustee documentation of your accamount claimed is reasonable and necessary.	tual expenses, and y	ou must show that the additional	\$	0.00	
29.	<b>Education expenses for dependent children who are y</b> c \$160.42* per child) that you pay for your dependent childre public elementary or secondary school.	ounger than 18. The en who are younger th	e monthly expenses (not more than han 18 years old to attend a private or			
	You must give your case trustee documentation of your ac claimed is reasonable and necessary and not already according to the control of the					
	* Subject to adjustment on 4/01/19, and every 3 years after	r that for cases begui	n on or after the date of adjustment.	\$	0.00	
30.	Additional food and clothing expense. The monthly among higher than the combined food and clothing allowances in than 5% of the food and clothing allowances in the IRS Na	the IRS National Star				
	To find a chart showing the maximum additional allowance instructions for this form. This chart may also be available					
	You must show that the additional amount claimed is reason	onable and necessar	у.	\$	21.00	
31.	Continuing charitable contributions. The amount that you instruments to a religious or charitable organization. 26 U.S.		ntribute in the form of cash or financial	+\$	0.00	
		c.c. 3 o(o)(1) (2).				
32.	Add all of the additional expense deductions. Add lines 25 through 31.			\$	771.00	

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or 1 Edward Michael Pinkosky Case number (if known)

35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.				
Loans, and other secured debt, fill in lines 33a through 33e. To calculate the total average monthly payment, and all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.    Mortgages on your home:	Deductions for Debt Payment			
Average monthly payment. Add lines 33a through 33d.  Total average monthly payment. Add lines 34d.  Monthly cure amount.  No. Coto line 36.  Total cure amount.  Monthly cure amount.  Monthly cure amount.  Monthly cure amount.  Addition to the payments.  Identify property that secures the debt.  Total cure amount.  Monthly cure amount.  Monthly cure amount.  Addition to the payments.  Identify payment. Add lines 4.  Monthly cure amount.  Addition to	loans, and other secured debt, fill in	n lines 33a through 33e.		
33a. Copy line 9b here			to caon occured	
Loans on your first two vehicles:   33b.   Copy line 13b here	Mortgages on your home:			
Loans on your first two vehicles:   33b.   Copy line 13b here	33a. Copy line 9b here		=>	\$ 2,032.96
33d. Copy line 13e here   33d. List other secured debts:  Name of each creditor for other secured debt    Mavertys Furniture				
33d. Copy line 13e here   33d. List other secured debts:  Name of each creditor for other secured debt    Mavertys Furniture	33b. Copy line 13b here		=>	\$
No   No   No   No   No   No   No   No				\$ 0.00
Havertys Furniture  King size bed \$100, 2 - night stands  No Yes \$ 125.00  No Yes \$  No Yes \$  And lines 33a through 33d  Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33. to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.  Name of the creditor  Identify property that secures the debt  Total cure amount  Total cure amount  Amonthly cure amount  Fool \$  Total S  O.00  Copy total here=>  Total  Copy total here=>  Copy total here=>  No. Go to line 36.  O.00  No. Go to line 36.  Total cure amount are past due as of the filling date of your bankruptcy case? 11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.				
Havertys Furniture \$100	Name of each creditor for other secured deb	t Identify property that secures the debt	include taxes or	
Havertys Furniture \$100		King size had \$100.2 night stands	■ No	
No   Yes   \$   33e. Total average monthly payment. Add lines 33a through 33d   \$ 2,157.96   \$ 2,157.96   \$ 2,157.96     34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?    No. Go to line 35.   Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.    Name of the creditor   Identify property that secures the debt   Total cure amount   Monthly cure amount    -NONE-   \$ 0.00   \$ 0.00	Havertys Furniture		_	¢ 125.00
Yes   \$   No   Yes   \$   No   Yes   \$   Yes   \$   No   Yes   \$   Yes   Yes   \$   Yes   Y	<del>-</del>			Ψ
33e. Total average monthly payment. Add lines 33a through 33d \$ \text{2,157.96}\$\$ \$				
33e. Total average monthly payment. Add lines 33a through 33d  \$ 2,157.96  Copy total here=> \$ 2,157.96  34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  No. Go to line 35.  Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.  Name of the creditor  Identify property that secures the debt  Total cure amount  +60 = \$  Total  Do.00  Copy total here=> \$ 0.0  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.			U Yes	\$
33e. Total average monthly payment. Add lines 33a through 33d \$ \text{2,157.96}\$ \$ \text			□ No	
33e. Total average monthly payment. Add lines 33a through 33d \$ \text{2,157.96}\$ \$ \text{34c}\$ any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  ■ No. Go to line 35.  □ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.  Name of the creditor   Identify property that secures the debt   Total cure amount   \text{Monthly cure amount}    -NONE- \$ \div 60 = \$ \text{70al}\$ \$ \div 60 = \$ \text{10.00}\$ \$ \div 60 = \$ \div 60			☐ Yes	+\$
33e. Total average monthly payment. Add lines 33a through 33d \$ \text{ 2,157.96}\$ \\  34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  No. Go to line 35.  Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.  Name of the creditor   Identify property that secures the debt   Total cure amount   Monthly cure amount    -NONE- \$\div \div 60 = \$\\ Total \$ \div 60 = \$\\ Total  \div \div \div \div \div \div \div \div				·
33e. Total average monthly payment. Add lines 33a through 33d \$\frac{1}{2}\$, \$\frac{157.96}{1}\$ here=> \$\frac{2}{157.96}\$  34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?  No. Go to line 35.  Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.  Name of the creditor   Identify property that secures the debt   Total cure amount   Monthly cure amount   -NONE- \$\div \div 60 = \$\frac{1}{2}\$  Total   \$\frac{1}{2}\$  Copy total here=> \$\frac{1}{2}\$  O.00  Solve owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filling date of your bankruptcy case? 11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.				
or other property necessary for your support or the support of your dependents?  No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the <i>cure amount</i> ). Next, divide by 60 and fill in the information below.  Name of the creditor  Identify property that secures the debt  Total cure amount  **OOO  Copy total here=> \$ 0.0  35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.	33e. Total average monthly payment. Ac	ld lines 33a through 33d\$	2 1 5 7 0 6	¢ 245706
-NONE-  Total \$ 60 = \$  Total \$ 0.00   Copy total here=> \$ 0.00    Solution	or other property necessary for you  ■ No. Go to line 35.  □ Yes. State any amount that you in listed in line 33, to keep pos	nust pay to a creditor, in addition to the payments session of your property (called the <i>cure amount</i> ).		
-NONE-  Total  \$ 60 = \$  Copy total here=> \$ 0.00  35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.			Total cure	Monthly cure
Total \$		,, , ,	amount	ama
Total \$ 0.00 total here=> \$ 0.00  35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.  No. Go to line 36.  Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.	-NONE-		\$ ÷ 60	0 = \$
are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.  □ No. Go to line 36.  ■ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.		Total \$	0.00 to	otal
Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.	are past due as of the filing date of			
ongoing priority claims, such as those you listed in line 19.	_	of those priority claims. Do not include current or		
Total amount of all past-due priority claims \$\$ <b>\$\$</b> ÷ 60 = \$ <b>466.6</b>		·		
	Total amount of all past-du	e priority claims \$	<b>28,000.00</b> ÷ 6	60 = \$466.6

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ebtor 1	Edw	ard Michael Pinkosky		Ca	se ni	number (if known)
	For more	eligible to file a case under Chapter 13? 11 U.S.C. § information, go online using the link for Bankruptcy Bains for this form. Bankruptcy Basics may also be available.	s <i>ics</i> specifi			
	■ No.	Go to line 37.				
	_	Fill in the following information.				
		Projected monthly plan payment if you were filing under	er Chapter	13	\$	
		Current multiplier for your district as stated on the list i Administrative Office of the United States Courts (for c and North Carolina) or by the Executive Office for Unit (for all other districts).	districts in A	Alabama	X	
		To find a list of district multipliers that includes your district link specified in the separate instructions for this for be available at the bankruptcy clerk's office.				Copy total
		Average monthly administrative expense if you were fi	ling under	Chapter 13		\$ here=> \$
37.		of the deductions for debt payment. es 33e through 36.				\$
Tota	al Deduc	tions from Income				
38.	Add all o	of the allowed deductions.				
		ne 24, All of the expenses allowed under IRS e allowances	\$	4,672.4	0	
	•	e allowanceseallowances allowances allowances allowances and the additional expense deductions	\$	771.0	_	
		ne 37, All of the deductions for debt payment	+\$	2,624.6	_	
	оору ш	to or, run or the deductions for dost payment		2,024.0		
		Total deductions	\$	8,068.0	3	Copy total here \$ 8,068.03
Part 3	Det	termine Whether There is a Presumption of Abuse				
39.	Calculate	e monthly disposable income for 60 months				
	39a. Co	ppy line 4, adjusted current monthly income	\$	7,596.1	6	
	39b. Co	ppy line 38, Total deductions	- \$	8,068.0	3	
		onthly disposable income. 11 U.S.C. § 707(b)(2). obtract line 39b from line 39a	\$	-471.8	7_	Copy here=>\$ -471.87
	For the	next 60 months (5 years)				x 60
	39d. <b>To</b>	tal. Multiply line 39c by 60	390	d. \$	-28	8,312.20   Copy   \$ -28,312.20
40.	Find out	whether there is a presumption of abuse. Check the	box that a	applies:		
	■ The I	ine 39d is less than \$7,700*. On the top of page 1 of the	his form, cł	heck box 1, Th	nere	e is no presumption of abuse. Go to Part 5.
		line 39d is more than \$12,850*. On the top of page 1 o	of this form,	, check box 2,	The	ere is a presumption of abuse. You may fill out
	☐ The I	line 39d is at least \$7,700*, but not more than \$12,85	<b>0*.</b> Go to li	ne 41.		
		to adjustment on 4/01/19, and every 3 years after that for			the	e date of adjustment.

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ebtor 1	Edw	rard Michael Pinkosky	Case	e number ( <i>if known</i> )		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled a Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.		\$x .25	7	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i Multiply line 41a by 0.25		\$	Copy here=>	\$
25	% of y	ne whether the income you have left over after subtracting all allowed do your unsecured, nonpriority debt.  le box that applies:		ctions is enough to pa	ay	
		<b>39d is less than line 41b.</b> On the top of page 1 of this form, check box 1, <i>Th</i> p Part 5.	nere i	is no presumption of al	ouse.	
		<b>39d is equal to or more than line 41b.</b> On the top of page 1 of this form, ch <i>umption of abuse.</i> You may fill out Part 4 if you claim special circumstances.				
Part 4:	Giv	ve Details About Special Circumstances				
reas	onable  lo. Go  es. Fil  ite  You	we any special circumstances that justify additional expenses or adjustment alternative? 11 U.S.C. § 707(b)(2)(B).  To to Part 5.  I in the following information. All figures should reflect your average monthly on. You may include expenses you listed in line 25.  The property of the special circumstances that make the processary and reasonable. You must also give your case trustee documentation in the special circumstances that make the processary and reasonable. You must also give your case trustee documentation in the special circumstances that make the processary and reasonable. You must also give your case trustee documentation in the special circumstances that make the processary and reasonable.	expe	ense or income adjustm penses or income adju	ent for ea	
	G	Sive a detailed explanation of the special circumstances		erage monthly expens income adjustment	se	
	L	ime Disease (meds vary month to month)	\$	700.	00	
	ľ	V Vit C treatments (monthly)	\$	600.	00	
	-	Specialist lime disease Doctor	\$	300.	00	
	_		\$	S		
Part 5:	Sig	ın Below				
	By si	gning here, I declare under penalty of perjury that the information on this state	emei	nt and in any attachme	nts is true	and correct.
	E	/ Edward Michael Pinkosky dward Michael Pinkosky gnature of Debtor 1				
Da	te Ja	nnuary 17, 2019 M / DD / YYYY				

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-10017 Doc 1 Filed 01/17/19 Entered 01/17/19 14:05:23 Desc Main Document Page 58 of 60

B2030 (Form 2030) (12/15)

### **United States Bankruptcy Court** Western District of North Carolina

In re	Edward Michael Pinkosky		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	ENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,628.00
	Prior to the filing of this statement I have received	1	\$	1,628.00
	Balance Due			0.00
2.	The source of the compensation paid to me was:			
	$\blacksquare$ Debtor $\square$ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed com	npensation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compencopy of the agreement, together with a list of the n			
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects	s of the bankruptcy o	ease, including:
	<ul> <li>a. Analysis of the debtor's financial situation, and rend</li> <li>b. Preparation and filing of any petition, schedules, state.</li> <li>c. Representation of the debtor at the meeting of credid. [Other provisions as needed]</li> </ul>	atement of affairs and plan which	may be required;	
6.	By agreement with the debtor(s), the above-disclosed f conversions, adversary proceedings a			
		CERTIFICATION		
	I certify that the foregoing is a complete statement of a pankruptcy proceeding.	ny agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
J	lanuary 17, 2019	/s/ T. Bentley Leo	nard	
Ī	Date	T. Bentley Leonar		
		Signature of Attorne Leonard & Moore		
		274 Merrimon Ave		
		Asheville, NC 288		
		828-255-0456 Fa: bentleyleonard@l		com
		Name of law firm		

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#### **United States Bankruptcy Court** Western District of North Carolina

	Western District of North Caron	ша	
In re Edward Michael Pinkosky		Case No.	
	Debtor(s)	Chapter	7
VERII	FICATION OF CREDITOR	MATRIX	
The above-named Debtor hereby verifies th	at the attached list of creditors is true and	correct to the best	of his/her knowledge.
Date: January 17, 2019	/s/ Edward Michael Pinkosky		
	Edward Michael Pinkosky		

Signature of Debtor

Barclays Bank Case 19-10017 PO Box 8802 Wilmington, DE 19899

Tik RACHIBE Botts Charge AD Me 60 75 North Market Street Asheville, NC 28801

Martin Winkler & Josef Resch c/o Gary M. Zeidwig PA 4849 N. dixie Hwy., Suite 103 & 104

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Desc Main

Chase Card PO Box 15298 Wilmington, DE 19850

Wilson, NC 27894-1847

BB&T \*

Bankruptcy Dept PO Box 1847

> NC Dept of Revenue Attn Bankruptcy PO Box 1168 Raleigh, NC 27602

Fort Lauderdale, FL 33334

Dillards Attn Bankruptcy Dept PO Box 103104 Roswell, GA 30076 North Broward Radiologists PA c/o Americollect Inc PO Box 1566 Manitowoc, WI 54221

First Path c/o Doctors Business Bureau 202 N Federal Hwy Lake Worth, FL 33460-3438 Phoenix Emergency SVCS of Broward Co c/o Commonwealth Financial 245 Main Street Dickson City, PA 18519-1641

First Premier 3820 N Louise Ave Sioux Falls, SD 57107-0145 US Attorneys Office Ste 1650 Carillon Bldg 227 W Trade Street Charlotte, NC 28202

Havertys Furniture PO Box 740506 Atlanta, GA 30374 US Bankruptcy Administrator Western District of NC 402 West Trade St Ste 200 Charlotte, NC 28202

Haywood Co Tax Collector 215 N Main St #224 Waynesville, NC 28786 Wells Fargo Bank Attn Bankruptcy Dept PO Box 10347

Imperial Point EKG Associate c/o First Fed Credit Coll Agen 3440 Hollywood Blvd. #415 Hollywood, FL 33021 Des Moines, IA 50306-0347

Internal Revenue Service Attn Bankruptcy PO Box 7346 Philadelphia, PA 19101-7346